

“Built Mercury-Free” Hospital Certification Form
Mercury (Hg) Elimination Leadership Program (HELP) Award

- ☐ Use non-mercury devices and sources where alternatives are available, and or feasible.
- ☐ Have a fluorescent tube recycling program.
- ☐ Have a mercury and alkaline battery collection program.
- ☐ Have in practice an Environmentally Preferable Purchasing (EPP) statement that bans the purchase of mercury-containing items without prior approval. Training and procedures for the use of the statement must be put in place. The procedure must include who may approve mercury purchases and list acceptable reasons for the purchase. The request to purchase any mercury containing devices should include a plan to manage the mercury safely and to collect all waste.
- ☐ Have a plan for total elimination of mercury laboratory chemicals.

Your signature certifies that your hospital was built mercury-free and has met the above goals.

Hospital Name:		
Street Address:		
Mailing Address (if different from Street Address):		
City:	State:	Zip Code:
Email Address:	Phone Number:	
Your Printed Name:		Title:
Signature:		Date: